

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: _____		2 Serial/Patent # <u>152071</u>	
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3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
7 TOTAL AMOUNT OF REFUND			\$

10 REASON:

Overpayment
Duplicate Payment
No Fee Due (Explanation):

8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

9

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11 REFUND REQUESTED BY: _____

TYPED/PRINTED NAME: _____ TITLE: _____
 SIGNATURE: _____
 OFFICE: _____
 PHONE: 86/29/2005 PKIOWELL
 01/18/03 SHASHANK 00000029 181171 10520711
 DC FL: 1632 500.00 CR

 THIS SPACE RESERVED FOR FINANCE USE ONLY:
 APPROVED: _____ DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: